



ALLIA.62F1C1C1

*Rce/H617*  
*IM*  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant	:	Schutt et. al.	)	Group Art Unit 1617
Appl. No.	:	09/991,445	)	
Filed	:	Nov 16, 2001	)	
For	:	Stabilized Microbubble Compositions	)	
Examiner	:	Sharareh, S.	)	

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: United States Patent Office, Commissioner of Patents and Trademarks, Box RCE, Alexandria, VA 22313-1450 on:

*22 Dec 2004*

*Lauren Sng*

Lauren Sng

**REQUEST FOR CONTINUED EXAMINATION**

Commissioner for Patents  
Box RCE  
Arlington, VA 22313-1450

Dear Sir:

Applicant is hereby filing a Request for Continued Examination ("RCE"). Prosecution of the above entitled application is currently closed in that a final Office Action was received dated July 1, 2004. Applicant is filing an RCE and has included a checks for the RCE fee.

Enclosed are:

- (X) A response in the form of an Amendment in 12 pages.
- (X) A Request for Continued Examination and a check in the amount \$790 for the RCE fee.
- (X) A check for a three month extension of time in the amount of \$1020.

12/29/2004 AWONDAF1 00000066 09991445

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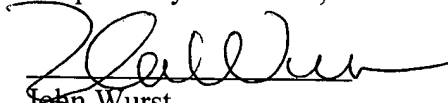
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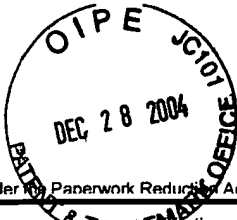
Apple. No. : 09/991,445  
Filed : Nov. 16, 2001

(X) A return postcard.

Dated: 12/22/04

Respectfully submitted,

  
John Wurst  
Registration No. 40,283  
(858) 410-5174



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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)  
1,810.

### Complete if Known

Application Number 09/991,445

Filing Date 16 November 2001

First Named Inventor Schutt, et al.

Examiner Name Sharareh, S

Art Unit 3983

Attorney Docket No. 062F1C1C1

### METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, **except for the filing fee**

☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☐ Credit any overpayments

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Fee (\$)  
50

Small Entity  
Fee (\$)  
25

Each independent claim over 3 (including Reissues)

200

100

Multiple dependent claims

360

180

##### Total Claims

##### Extra Claims

##### Fee (\$)

##### Fee Paid (\$)

\_\_\_\_\_ - 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

##### Indep. Claims

##### Extra Claims

##### Fee (\$)

##### Fee Paid (\$)

\_\_\_\_\_ - 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

##### Multiple Dependent Claims

##### Fee (\$)

##### Fee Paid (\$)

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets \_\_\_\_\_ Extra Sheets \_\_\_\_\_ Number of each additional 50 or fraction thereof \_\_\_\_\_ Fee (\$) \_\_\_\_\_ Fee Paid (\$) \_\_\_\_\_

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

##### Fees Paid (\$)

Other (e.g., late filing surcharge): RCE fee and Extension fee

\$1,810.

#### SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 40,283	Telephone 858/410-5174
Name (Print/Type)	John Wurst		Date 22 December 2004

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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